

RECEIVED

STATE OF SOUTH DAKOTA  
**Statement of Legal Newspaper Ownership and Circulation**  
 S.D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <i>Waubay Clipper</i>	2. DATE <i>9-27-12</i>	
3. FREQUENCY OF ISSUE <i>Weekly</i>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <i>50</i>	3B. ANNUAL SUBSCRIPTION PRICE <i>\$27-In-state, \$35-out-of-state</i>
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <i>122 N. Main St. - P.O. Box 47 - Waubay - SD - 57273-0047</i>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <i>P.O. Box 47 - Waubay, SD 57273-0047</i>		
6. FULL NAME OF PUBLISHER: <i>Linda M. Walters</i>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.) FULL NAME <i>Linda M. Walters</i> COMPLETE MAILING ADDRESS <i>P.O. Box 47 - Waubay, SD 57273-0047</i>		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <i>None</i>		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	<i>700</i>	<i>700</i>
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors and counter sales.	<i>375</i>	<i>375</i>
2. Mail Subscription (Paid and or requested)	<i>283</i>	<i>283</i>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	<i>658</i>	<i>658</i>
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	<i>7</i>	<i>7</i>
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	<i>0</i>	<i>0</i>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	<i>665</i>	<i>665</i>
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	<i>35</i>	<i>35</i>
2. Return from News Agents	<i>0</i>	<i>0</i>
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	<i>700</i>	<i>700</i>

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public  
 I swear that the statements made by me are true, correct, and complete:

*Linda M. Walters*  
 (Signature)

State of South Dakota )  
 County of *Day* )  
 (Seal)

*Owner/Editor*  
 (Title)

Sworn to before me this 27<sup>th</sup> day of *Sept.*, 2012  
*Paula J. Belsch*  
 Notary Public

My commission expires: *Paula J. Belsch*  
 Notary Public, Day County, S. Dak.  
 My Commission Expires  
 January 30, 2016